

## **Idaho Science and Aerospace Scholars**

In cooperation with NASA Aerospace Scholars and supported by the Idaho State Department of Education, along with Idaho business, industry, and education partners

## **2014-2015 Teacher Mentor Application Instructions**

The State Department of Education is proud to sponsor the Idaho Science and Aerospace Scholars (ISAS) program during the 2014-2015 school year. The State Department of Education, in partnership with NASA Aerospace Scholars, administers this unique program related to space exploration, designed to inspire 11<sup>th</sup> grade students to pursue degrees and careers in the STEM fields. Financial support from the State Department of Education, along with Idaho business, industry, and education partners allows this program to exist at no cost to participating students.

The Idaho program engages 11th grade students in an interactive online course through the Idaho Digital Learning Academy using NASA developed curriculum where students work with master educators in STEM topics. Upon completion of the online curriculum, Capstone Events will be held at the University of Idaho in Moscow, Center for Advanced Energy Studies in Idaho Falls, and Gowen Field in Boise. Two seven day summer residential academies will be held at Boise State University and NASA Ames Research Center where student scholars work in teams, with Idaho STEM professionals and NASA engineers, developing a simulated human space exploration mission.

#### How do I apply to be a Teacher Mentor?

Complete the application below by **January 16, 2015**. Notification of selection will be sent out no later than February 27, 2015. Complete the 2015 Summer Academy Teacher Mentor Application located at <a href="http://www.sde.idaho.gov/site/science/ISAS/">http://www.sde.idaho.gov/site/science/ISAS/</a>.

For further information, contact Peter Kayouras at pgkayouras@sde.idaho.gov or 208-332-6975.

#### Who can be a Teacher Mentor?

We are searching for certified Idaho science, technology, engineering, or mathematics teachers to serve as Teacher Mentors during each summer academy. Teachers selected to participate will receive a \$2,000 stipend and travel expenses during the summer academy.

#### What are the minimum requirements to become a Teacher Mentor?

- Must be a U.S. Citizen
- Must be an Idaho resident
- Must possess a current Idaho Education Credential
- Must lead Student Scholars in an online learning community prior to the Summer Academy
- Must attend a Teacher Mentor Training prior to the Summer Academy
- Must attend a Regional Capstone Event prior to the Summer Academy

#### What are the responsibilities of a Teacher Mentor?

- Abide by the Code of Ethics and Standard Practices for Idaho Educators.
- Participate on site for the duration of the Summer Academy including lodging.
- Be present and chaperone Student Scholars during all Summer Academy activities.
- Ensure the safety of Student Scholars and enforce academy rules.
- Assist Student Scholars in the research, development, presentation of team projects.
- Accompany Student Scholars in travel to and from NASA Ames Research Center.
- Enforce the student code of conduct and informational technology polices.
- Participate in required NASA OEPM data collection.
- Provide letters of reference to Student Scholars upon request.

#### How do students benefit from the program?

- Students learn NASA and Idaho STEM content through an engaging, interactive, cohort based online learning experience.
- Students investigate NASA and Idaho STEM careers through interactions with experts in the field.
- Students gain access to current NASA and Idaho STEM professionals, resources, and facilities.
- Students increase content knowledge and process skills in STEM.
- Students earn concurrent credit from post-secondary institutions.

#### What is the period of performance?

Sunday morning through Saturday afternoon of designated Academy week.

**Academy One**: July 12 - 18, 2015; **Academy Two**: July 26 – August 1, 2015

Please note on your application if you have a preference or conflict with any academy dates.

### A current resume must be submitted with this application.

Teacher Mentor Application Deadline: Faxed or Postmarked by January 16, 2015.

# Idaho Science and Aerospace Scholars Teacher Mentor Application

**Application Due Date: January 16, 2015** 

| Personal Information  |              |            |            |                              |           |
|---|--------------|------------|------------|------------------------------|-----------|
| First Name:   |              |            |            |                              |           |
| Middle Name:  |              |            |            |                              |           |
| Last Name:  |              |            |            |                              |           |
| Mailing Address:  |              |            |            |                              |           |
| Home Phone:   |              |            |            |                              |           |
| Work Phone:   |              |            |            |                              |           |
| Cell Phone:   |              |            |            |                              |           |
| Email:  |              |            |            |                              |           |
| Academy Week Preference or N  | lo Preferenc | ce:        |            |                              |           |
| Please bubble in each answer  | below        |            |            |                              |           |
| Are you a US Citizen?   | Yes          | $\bigcirc$ | No         | $\circ$                      |           |
| Are you a male or female?   | Male         | $\bigcirc$ | Female     | $\bigcirc$                   |           |
| Are you an Idaho resident?  | Yes          | $\bigcirc$ | No         |                              |           |
| School Information  |              |            |            |                              |           |
| School Name:  |              |            |            |                              |           |
| School Address:   |              |            |            |                              |           |
| Recommendation Letter As pa   |              |            |            |                              |           |
| current or former supervisors, d<br>to your professional qualificatio | _            |            | school adn | inistrators or someone who c | an attest |

| Reference 1   | Reference 2                                   |
|---|---|
| Name:   | Name:   |
| Title:  | Title:  |
| Institution:  | Institution:                                  |
| Phone:  | Phone:  |
| Email:  | Email:  |
| Once you have submitted your application, the system will en<br>line letter of recommendation on your behalf. Please inform the<br>Department of Education with these instructions. |   |
| <b>Note</b> : It is the responsibility of the applicant to follow-up with to ensure the recommendation is submitted electronically by   |   |
| Idaho State Legislative District Information  |   |
| Idaho County Name:  |   |
| Idaho Legislative District Number:  |   |
| Idaho State Senator Name:   |   |
| Idaho State Representative Name:  |   |
| Idaho State Representative Name:  |   |
| Other information: Explain why you wish to par would be successful. Describe personal characterist explanation. (750 words or less). (You may use a second                          | tics, strengths and interests to support your |
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| How do you anticipate your ISAS experience to impact your current teaching assignment? (750 words or less). (You may use a separate sheet of paper)                            |
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| What experiences or special training have you had with youth camps or student travel?  |
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| <b>Optional Information:</b> Applicants are strongly encouraged to provide the information requested below. This information is collected for federal reporting purposes only. |
| Ethnicity: Hispanic or Latino O Not-Hispanic or Not-Latino O   |
| Race: American Indian or Alaskan Native Asian Black or African American  |
| Native Hawaiian or other Pacific Islander  |
| <b>Person with Disability:</b> Yes O No O  |
| Applicant Certification (Please check box)   |
| I certify that all of the information contained in this application is complete and correct and that I meet all of the eligibility requirements stated in this application.    |
| Once the application is received, an email confirmation will be sent to you confirming receipt.  |

**Application with resume** must be received by fax or postmarked by **January 16, 2015** to:

Marilyn O. Allen, Idaho State Department of Education, P.O. Box 83720, Boise, ID 83720-0027 Telephone: 208-332-6974 Fax: 208-334-2228